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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name Write the name that is on	Robyn First name	First name
your government-issued picture identification (for example, your driver's license or passport	N Middle name Tolliver	Middle name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social Security number or	XXX - XX- <u>0223</u> OR	XXX - XX-
federal Individual Taxpayer Identification number (ITIN)	9 vv - vv-	9 xx - xx-

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D	ebtor 1 Robyn	N	Tolliver	(Case number <i>(if k</i>	nown)	
	First Name	Middle Name	Last Name				
		About Debtor 1:			About Debt	or 2 (Spouse Only in	ո a Joint Case)։
4.	Any business names and Employer	I have not used any	business names or EIN	s.	I have no	ot used any business na	mes or EINs.
	Identification Numbers (EIN) you have used in the last	Business name			Business na	ame	
	8 years	Business name			Business na	ame	
	Include trade names and doing business as names	EIN			EIN		
		EIN			EIN		
5.	Where you live				If Debtor 2 li	ives at a different addr	ress:
		Number Street		_	Number	Street	
		Chicago Illino			City	State	Zip Code
		Cook	- Σιρ σοι	<u>.</u>	City	State	Zip Gode
		County			County		
		If your mailing addres above, fill it in here. N notices to you at this ma	ote that the court will s			mailing address is down. Note that the court wind ddress.	
		Number Street			Number	Street	
		Cit	Ohaha Zin (No. 44	Cit	Chada	7in Onda
_		City	State Zip C	oue	City	State	Zip Code
6.	Why you are choosing this district	Check one:			Check one:		
	to file for bankruptcy		onger man in any other	district.	Over the lived in the	last 180 days before filir his district longer than in	ng this petition, I have any other district.
		I have another reaso	n. Explain. (See 28 U.S.	C. §§ 1408.)	I have an	nother reason. Explain. (S	See 28 U.S.C. §§ 1408.)

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Debtor 1 Robyn	N	Tolliver	Case number (if knd	own)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Ab	oout Your Bankruptcy Ca	ase		
 The chapter of the Bankruptcy Code you are choosing to file under 		description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and		
8. How you will pay the fee	more details about cashier's check, or may pay with a crec I need to pay the fundividuals to Pay I request that my funding may, but is not the official poverty you choose this op	how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-printere in installments. If you choose Your Filing Fee in Installments (Cofee be waived (You may request ot required to, waive your fee, and line that applies to your family significant or the property of the property	ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used as the submitted of the submitted from the submitted of the submitted from the submitt	the clerk's office in your local court for e fee yourself, you may pay with cash, it payment on your behalf, your attorney an and attach the <i>Application for AA</i>). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
9. Have you filed for bankruptcy within the last 8 years?	Yes. District District District	When When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	<u>W</u> hen	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you rent your residence?	✓ No. Go to	· -		o you want to stay in your residence? Set You (Form 101A) and file it with

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 N Niddle Name
 Tolliver
 Case number (if known)

 Last Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Robyn First Name	N Middle Name	Tolliver Last Name	Case number (if known)	
	estions for Reporting Purpose			
16. What kind of debts do you have?	16a. Are your debts primaril "incurred by an individuation No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril	y consumer debts' al primarily for a per y business debts? investment or throu	sonal, family, or household Business debts are debts thing the operation of the bu	purpose." nat you incurred to obtain siness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	er 7. Do you estimate		y is excluded and administrative reditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5 5,001-1 10,001-	0,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million [] 0,001-\$50 million [] 0,001-\$100 million [] 00,001-\$500 million []	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million [] 0,001-\$50 million [] 0,001-\$100 million [] 00,001-\$500 million []	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	correct. If I have chosen to file under C of title 11, United States Code under Chapter 7. If no attorney represents me a out this document, I have obta I request relief in accordance of I understand making a false st	Chapter 7, I am awar e. I understand the r nd I did not pay or a ained and read the r with the chapter of t atement, concealing	e that I may proceed, if eligielief available under each congree to pay someone who otice required by 11 U.S.C itle 11, United States Code property, or obtaining mo	e, specified in this petition.
	both. 18 U.S.C. §§ 152, 1341		1100 ap to 4200,000, or IIIIp	one of the second of the secon
	/s/ Robyn Tolliver Signature of Debtor 1		Signature of Debt	or 2
	Executed on 3/1/2017 MM / E	DD / YYYY	Executed on _	MM / DD / YYYY

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Debtor 1 Robyn	N	Tolliver	Case number (i	fknown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, Unite	nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	342(b) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an	. ,			dules filed with the petition is incorrect.
attorney, you do not	· ·	, ,		•
need to file this page.	/s/ Morsheda Hash	ρm	Date	3/1/2017
	Signature of Attorney			/IM / DD / YYYY
	g,			
	Morsheda Hashem			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3122374973	Email address	mhashem@semradlaw.com
	Bar number		State	

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Fill in this information to identify your case:								
Debtor 1	Robyn	N	Tolliver					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois					
(State)								
Case number (If known)								

	Check if	this	is	an
_	amende	d filir	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	#0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,576.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,576.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$3,975.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	φο,στο.σο
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$1,000.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$49,006.00
	\$53,981.00
Your total liabilities	
Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses	\$3,011.27
Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I)	\$3,011.27

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Deb	tor 1 Robyn	N	Tolliver	Case number (if known)						
	First Name	Middle Name	Last Name							
Part	4: Answer These Qu	estions for Administrat	tive and Statistical Records	S						
6. A	re you filing for bankrupto	cy under Chapters 7, 11, o	r 13?							
Г	No. You have nothing to	report on this part of the fo	orm. Check this box and submit the	nis form to the court with your other so	chedules.					
	Yes.									
	<u>v</u>									
7. W	/hat kind of debt do you h	ave?								
Ŀ			umer debts are those incurred by a Fill out lines 8-10 for statistical pur	an individual primarily for a personal,						
			·							
	Your debts are not pri this form to the court wi		ou have nothing to report on this	part of the form. Check this box and so	ubmit					
		our Current Monthly Incom Form 122B Line 11; OR , Fo	ne: Copy your total current month orm 122C-1 Line 14.	ly income from Official	\$3,668.93					
9.	Copy the following speci	y the following special categories of claims from Part 4, line 6 of Schedule E/F:								
	From Part 4 on Schedule	E/F, copy the following:		Total claim						
				\$0.00						
	9a. Domestic support oblig	gations (Copy line 6a.)		<u>-</u>						
	9b. Taxes and certain other	r debts you owe the govern	ment. (Copy line 6b.)	\$1,000.00						
	9c. Claims for death or per	sonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00						
9d. Student loans. (Copy line 6f.) \$36,401.00										
	, .,	,		\$0.00						
	9e. Obligations arising out priority claims. (Copy line 6		or divorce that you did not report a	as <u>Φ</u> 0.00						
		· ·	\$0.00							
	9f. Debts to pension or pro	ofit-sharing plans, and other	similar debts. (Copy line 6h.)							

\$37,401.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information	to identify your o	ase:					
					Tallinan			
Debtor 1	Roby First	/n Name	N Middle N	lame	Tolliver Last Name			
Debtor 2 (Spouse, if fi	iling) =:	Nicol	NA'-L-II- N		Land Manage			
	- 11130	Name	Middle N	lame	Last Name			
United Sta	ates Bankrup	otcy Court for the:	Northern		District of Illinois (State)			
Case nun	nber				(5.5.5)			
-								Check if this is an
Officia	al Form	106A/B						amended filing
Sche	dule A	/B: Prope	erty					12/
category responsib write you	where you t le for supply r name and	hink it fits best. I ying correct infor case number (if I	Be as complete a mation. If more s known). Answer e	nd acc pace i very q	esset only once. If an asset fits in more curate as possible. If two married peoples s needed, attach a separate sheet to the destion. Other Real Estate You Own or Ha	le are his for	filing together, both a m. On the top of any a	are equally
	No. Go to		quitable interest	in any	residence, building, land, or similar pro	operty	f	
		is the property?						
	103. WITOIC	is the property:		What	is the property? Check all that apply.	i	Do not deduct secured	claims or exemptions. Put
1.1				single-family home	•	the amount of any secured claims on Schedule		
	Street addr	ess, if available, or	other description	Duplex or multi-unit building				aims Secured by Property.
					Condominium or cooperative		Current value of the entire property?	Current value of the portion you own?
				ш.	Manufactured or mobile home	•		<u> </u>
	Number	Street		ш	and	ı	Describe the nature o	f your ownership
					nvestment property imeshare	i	interest (such as fee s	simple, tenancy by
	City	City State Z		Other		the entireties, or a life estate), if known.		
				Who one.	has an interest in the property? Check	:	Check if this is co (see instructions)	ommunity property
					Debtor 1 only			
				\Box	Debtor 2 only			
					Pebtor 1 and Debtor 2 only			
					t least one of the debtors and another			
					r information you wish to add about th erty identification number:	is iten	n, such as local	
If you	own or have	e more than one, I	ist here:	ргор	erty identification number.			
, , , ,		- · · · · · · · · · · · · · · · · · · ·		<u>Wh</u> a	is the property? Check all that apply.			claims or exemptions. Put
1.2	Street addr	ess, if available, or	other description		ingle-family home			red claims on Schedule D: aims Secured by Property.
			, , , , , , , , , , , , , , , , , , ,		Ouplex or multi-unit building		Current value of the	Current value of the
					Condominium or cooperative Manufactured or mobile home		entire property?	portion you own?
				ш	and	•		
	Number	Street	_		nvestment property		Describe the nature of	
	011	Obsta	7'- 0-1-		imeshare Other		interest (such as fee s the entireties, or a life	
	City	State	Zip Code		THE			
				Who one.	has an interest in the property? Check	: 	Check if this is co (see instructions)	ommunity property
					Pebtor 1 only		_	
					Debtor 2 only			
					Debtor 1 and Debtor 2 only			
				ш	t least one of the debtors and another			
					r information you wish to add about th erty identification number:	ıs iten	ı, such as local	

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Debtor 1	Robyn First Name	N Middle Name	Tolliver Last Name	Case numbe	(if known)	
1.3 Stre	et address, if available, or ot		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	apply.	the amount of any secu	-
City	State	[[[Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an	other	Check if this is co (see instructions)	estate), if known.
	the dollar value of the po ve attached for Part 1. Wr	rtion you own for a ite that number h		uding any entrie	s for pages	
Do you ow you own tl		equitable interest ou lease a vehicle,	t in any vehicles, whether they are also report it on Schedule G: Executo cycles			
☐ No ✓ Yes						
3.1	Make Model: Year: Approximate mileage:	Volkswagen Jetta 2008 125000	Who has an interest in the propone. ✓ Debtor 1 only Debtor 2 only	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the
	Other information: 2008 Volkswagen Jetta		Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)		entire property? \$3025.00	portion you own? \$3025.00
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the propose. Debtor 1 only	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Robyn First Name	N Middle Name	Tolliver Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communingtructions)	nly is and another	the amount of any secu	claims or exemptions. Put ared claims on Schedule D aims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communing instructions)	nly is and another	the amount of any secu	claims or exemptions. Put ared claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own?
			,			
	nples: Boats, trailers, motor No Yes Make Model:	•	who has an interest in the	motorcycle accessori	Do not deduct secured the amount of any secu	claims or exemptions. Put irred claims on <i>Schedule D</i>
Example Exampl	nples: Boats, trailers, motor No Yes Make	•	er recreational vehicles, other, fishing vessels, snowmobiles, Who has an interest in the	motorcycle accessori property? Check hly is and another	Do not deduct secured the amount of any secu	· ·

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Tolliver Debtor 1 Robyn Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$875.00 for Part 3. Write that number here

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Debt	or 1 Robyn	N	Tolliver	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	Describe You	ır Financial Assets			
Doy	you own or have a	any legal or equitable interes	t in any of the following	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. (have in your wallet, in your home, i	n a safe deposit box, and	on hand when you file your petition	
	✓ Yes			Cash:	\$25.00
17.	Examples: Checking and other simila			nares in credit unions, brokerage houses, itution, list each.	
	No ✓ Yes		Institution name:		
		17.1. Checking account:	Chase		\$700.00
		17.2. Checking account:	Bank of America		\$0.00
		17.3. Savings account:	-		
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		ds, or publicly traded stocks ds, investment accounts with broke	erage firms, money market	accounts	
	✓ No Yes	Institution or issuer name:			
19.		d stock and interests in incorpora p, and joint venture	ated and unincorporated	I businesses, including an interest in	
	Yes. Give specifinformation abouthem			% of ownership:	

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Deb	tor 1 Robyn First Name	N Middle Name	I olliver Last Name	Case number (if known)	
20.	Government and corp Negotiable instruments	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	ble and non-negotiabl	ites, and money orders.	
	✓ No Yes. Give specific information about them	Issuer name:	is to domeone by significant	g of delivering them.	
21.	Retirement or pension) theift covings account	o av other panaion av profit charing plans	
	No No	4A, ERISA, Neogii, 401(k), 403(b), timit savings account	s, or other pension or profit-sharing plans	
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
	,	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, publi			
	Yes	Electric:			
	_	Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or fo	or a number of years)	
	✓ No ☐ Yes	Issuer name and description:			
		-			

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Debt	tor 1 Robyn First Name	N Middle	Tolliver Case num Name Last Name	nber (if known)	
24.			count in a qualified ABLE program, or under a qualified	state tuition program.	
	_	0(b)(1), 529A(b), and 529	Đ(b)(1).		
	V No Ir	nstitution name and descr	ription. Separately file the records of any interests.11 U.S.C. §	§ 521(c):	
	_				
	_				
25.	Trusts, equitab exercisable for		property (other than anything listed in line 1), and right	s or powers	
	No Yes. Describ	pe			
26.			e secrets, and other intellectual property tes, proceeds from royalties and licensing agreements		
	✓ No				
	Yes. Describ	e			
					I
27.		hises, and other general ing permits, exclusive licer	al intangibles nses, cooperative association holdings, liquor licenses, profe	essional licenses	
	✓ No				
	Yes. Describ	oe			
					•
B.4					Ourse of the
Mor	ney or property	owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property Tax refunds owe				portion you own?
	Tax refunds owe	ed to you		7 Federal	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owe	ed to you ecific information hem, including whether	2016 Anticipated Tax Refund: Earned Income Credit and Child Credit	Federal:	portion you own? Do not deduct secured
	Tax refunds owe	ed to you ecific information	· ·	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owe	ed to you ecific information hem, including whether eady filed the returns	Child Credit		portion you own? Do not deduct secured claims or exemptions. \$1951.00
28.	Tax refunds owe No Yes. Give sp about t you alm and the	ed to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alm and the Family support Examples: Past d	ed to you ecific information hem, including whether eady filed the returns e tax years	Child Credit	State:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alroand the Family support Examples: Past d	ed to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alroand the Family support Examples: Past d	ect to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State: Local: ment, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alroand the Family support Examples: Past d	ect to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State: Local: ment, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alroand the Family support Examples: Past d	ect to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State: Local: ment, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe No Yes. Give sp about t you alroand the Family support Examples: Past d	ect to you ecific information hem, including whether eady filed the returns e tax years	Child Credit 2016 Anticipated Tax Refund	State: Local: ment, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$1951.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00
29.	Tax refunds owe No Yes. Give sp about t you alread the Family support Examples: Past d Yes. Give sp Other amounts Examples: Unpair	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, ecific information	Child Credit 2016 Anticipated Tax Refund	State: Local: ment, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$1951.00 \$1951.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owe No Yes. Give sp about t you alread the Family support Examples: Past d Yes. Give sp Other amounts Examples: Unpair	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, ecific information	Child Credit 2016 Anticipated Tax Refund spousal support, child support, maintenance, divorce settled nce payments, disability benefits, sick pay, vacation pay, wor	State: Local: ment, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$1951.00 \$1951.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owe No Yes. Give sp about t you alread the Family support Examples: Past d No Yes. Give sp Other amounts Examples: Unpair Social	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, ecific information someone owes you d wages, disability insuran Security benefits; unpaid	Child Credit 2016 Anticipated Tax Refund spousal support, child support, maintenance, divorce settled nce payments, disability benefits, sick pay, vacation pay, wor	State: Local: ment, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$1951.00 \$1951.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Robyn	N	Tolliver	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance paramples: Health, disabil		h savings account (HSA); credit,	nomeowner's, or renter's insurance	
	Yes. Name the insurrof each policy and list	ance company	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property If you are the beneficiary property because someo	of a living trust, expect pr		cy, or are currently entitled to receive	_
	No Yes. Describe				
33.			ou have filed a lawsuit or made ance claims, or rights to sue	a demand for payment	
	No Yes. Describe				
34.	Other contingent and u	 unliquidated claims of e	very nature, including counter	claims of the debtor and rights	
	✓ No Yes. Describe				
35.	Any financial assets yo	u did not already list			
	No Yes. Describe				
36.		•	Part 4, including any entries f		\$2676.00
Part	5: Describe Any Bu	siness-Related Prop	erty You Own or Have an I	nterest In. List any real estate in Pa	rt 1.
37.			rest in any business-related p		-
	•	,ga. or oquitable litte	. co. m any baomoso related p		Current value of the
	No. Go to Part 6. Yes. Go to line 38.				portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or	r commissions you alrea	ndy earned		
	✓ No Yes. Describe				
39.	Office equipment, furni Examples: Business-relat		modems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, ele	ectronic devices
	No Yes. Describe				

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Deb	tor 1 Robyn	N	Tolliver	Case number (if known)	
10	First Name	Middle Name	Last Name	tuo do	
40.		equipment, supplies you use in	business, and tools of yo	our trade	
	No No Describe				
	Yes. Describe				
	-				
41.	Inventory				
	✓ No				
	Yes. Describe				
42.	Interests in partnersh	nips or joint ventures			
	✓ No				
	Yes. Give specific	Name	of entity:	% of ownership:	
	information about				<u> </u>
	them				
43 (Customer lists mailing	lists, or other compilations			
		, note, or ether complications			
	No Yes Do your lists i	include personally identifiable info	ormation (as defined in 11 I	ISC 8 101(41A))?	
	Tes. Do your lists i	inolade personally identificable line	maion (as defined in 111)	5.5.5. § 101(4179):	
	☐ No				
	Yes. Desc	cribe			
44.	Any business-related	property you did not already I	ist		
	✓ No				
	Yes. Give specific				-
	information				
					_
					-
		all of your entries from Part 5, er here		pages you have attached	
<u> </u>					
Part		farm- and Commercial Fisingler interest in farmland, list it in Part		You Own or Have an Interest In.	
46.	Do you own or have a	any legal or equitable interest	in any farm- or commerc	ial fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47				portion you own? Do not deduct secured claims
					or exemptions
47.	Farm animals Examples: Livestock, p	ooultry, farm-raised fish			
	No				
	Yes. Describe				

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Debte	or 1 Robyn First Name	N Middle Name	Tolliver Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.	Farm and fishing equi	ipment, implements, machinery, fixtu	res, and tools of trade		
	✓ No				
	Yes. Describe				
50.	Farm and fishing supp	blies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.		ercial fishing-related property you di	d not already list		
	Ves. Describe				
	Tes. Bescribe				
52. Ar	ld the dollar value of a	all of your entries from Part 6, includi	ng any entries for pages y	you have attached	
		er here			
				<u>-</u>	
Part 7	Describe All Pro	operty You Own or Have an Inte	rest in That You Did No	ot List Above	
		pperty of any kind you did not already ets, country club membership	list?		
	√ No				
	Yes. Give specific				
	information				
54. Ac	ld the dollar value of a	all of your entries from Part 7. Write t	hat number here		•
		•			
Part 8	List the Totals of	of Each Part of this Form			
55. P	art 1: Total real estat	e, line 2			
56. p	art 2 total vehicles, li	ne 5	\$3025.00		
57. P a	art 3: Total personal a	nd household items, line 15	\$875.00		
58. P a	art 4: Total financial a	ssets, line 36	\$2676.00		
59. P	art 5: Total business-	related property, line 45			
60. P	art 6: Total farm- and	fishing-related property, line 52			
61. P	art 7: Total other prop	perty not listed, line 54			
62. T	otal personal property	y. Add lines 56 through 61	\$6576.00	Copy personal property total	+ \$6576.00
				101111111111111111111111111111111111111	¢6576.00
63. T c	otal of all property on	Schedule A/B. Add line 55 + line 62			\$6576.00

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Fill in this information to identify your case:							
Debtor 1	Robyn	N	Tolliver				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois				
			(State)				
Case number							
(If known)							

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Clair	m as Exempt						
1.	Which set of exemptions are you claim	ing? Check one only, ev	ven if your spouse is filing with you.					
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)					
	You are claiming federal exemption	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A	I/B that you claim as e	exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Misc. Household Goods and Furniture Line from Schedule A/B: 06	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
	Brief description: Misc. Jewelry Line from Schedule A/B: 12	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case?					

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Debtor 1 Robyn First Name Case number (if known) Tolliver Middle Name Last Name Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description: Misc. Electronics Line from	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 07 Brief	\$25.00		735 ILCS 5/12-1001(b)
description: Cash on Hand Line from Schedule A/B: 16	φ23.00	\$25.00 100% of fair market value, up to any applicable statutory limit	_
Brief description: Used Clothing	\$225.00	\$225.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit	
Brief description: Checking account, Chase	\$700.00	\$700.00 100% of fair market value, up to any	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17		applicable statutory limit	
Brief description: Checking account, Bank of America	\$0.00	\$0 100% of fair market value, up to any	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17		applicable statutory limit	
Brief description:	\$3,025.00	\$0	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
Volkswagen Jetta, 2008, 2008 Volkswagen Jetta Line from Schedule A/B: 03		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$1,009.00	\$1,009,00	735 ILCS 5/12-1001(g)(1)
Federal, 2016 Anticipated Tax Refund: Earned Income Credit and Child Credit		\$1,009.00 100% of fair market value, up to any applicable statutory limit	_
Line from Schedule A/B: 28			
Brief description:	\$942.00	\$942.00	735 ILCS 5/12-1001(b)
Federal, 2016 Anticipated Tax Refund Line from		100% of fair market value, up to any applicable statutory limit	_

Schedule A/B:

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		Do	ocument Page 22 of	69		
Fill in thi	is information to identify your ca	se:				
Debtor 1		N	Tolliver			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if		Middle Name	Last Name			
United S	States Bankruptcy Court for the:	Northern	District of Illinois			
Case nu	mber		(State)			
(If known)						01 1 11 11 1
Offic	ial Form 106D					Check if this is an amended filing
Sche	edule D: Credito	ors Who Ha	ve Claims Secur	ed by Prop	ertv	12/15
			e are filing together, both are equ			
more spa	ace is needed, copy the Additio		nber the entries, and attach it to			
	d case number (if known).					
1. Do	any creditors have claims se	,,				
Ш			with your other schedules. You hav	ve nothing else to repo	ort on this form.	
✓	Yes. Fill in all of the information	n below.				
Part 1:	List All Secured Claims					
2. L i	ist all secured claims. If a credit	or has more than one sec	cured claim, list the creditor	Column A	Column B	Column C
	eparately for each claim. If more th Part 2. As much as possible, list	· ·	ticular claim, list the other creditors	Amount of claim	Value of	Unsecured
	ame.	trie ciairris iri aipriabeticai	order according to the creditor's	Do not deduct the value of collateral.	collateral that supports	portion If any
					this claim	,
	antander Consumer USA	Describe the property	that secures the claim:	\$3,975.00	\$3,025.00	\$950.00
1	reditor's Name 4101 MYFORD RD FL 2	2008 Volkswagen Jetta	1			
_	Number Street	As of the date you file	, the claim is: Check all that apply.	•		
_		Contingent				
_	USTIN CA 92780	Unliquidated				
1	ity State ZIP Code /ho owes the debt? Check one.	Disputed				
Ī	Debtor 1 only	Nature of lien. Check	all that apply.			
Ī	Debtor 2 only		made (such as mortgage or secured			
Ī	Debtor 1 and Debtor 2 only	car loan)				
	At least one of the debtors		as tax lien, mechanic's lien)			
	and another Check if this claim relates	Judgment lien from				
_ L	to a community debt	Other (including a r	ight to offset)			
	ate debt was <u>2/1/2010</u> ncurred	Last 4 digits of accou	nt number1000			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$3,975.00

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		Do	ocument Page 23 c	of 69			
Fill in this in	formation to identify your case:						
Debtor 1	Robyn First Name	N Middle Name	Tolliver Last Name				
Debtor 2 (Spouse, if filing		Middle Name	Last Name				
United State	es Bankruptcy Court for the: Northe	ern	District of Illinois				
Case numb	er		(State)				
Official	Form 106E/F				Chec	k if this is an	amended filing
Sched	dule E/F: Credito	ors Who	Have Unsecur	ed Claims	;		12/15
Form 106A/ claims that the entries i known).	to any executory contracts or une B) and on Schedule G: Executory (are listed in Schedule D: Creditors in the boxes on the left. Attach the st All of Your PRIORITY Unse	Contracts and Un s Who Hold Claim e Continuation Pa	expired Leases (Official Form 1 s Secured by Property. If more	06G). Do not include a space is needed, copy	any creditors the Part you	with partia u need, fill it	lly secured t out, number
2. List al listed, As mu Contin	y creditors have priority unsecured on Go to Part 2. es. I of your priority unsecured claims identify what type of claim it is. If a cloth as possible, list the claims in alpha uation Page of Part 1. If more than on explanation of each type of claim, so	s. If a creditor has laim has both prior abetical order accone creditor holds a	more than one priority unsecured ity and nonpriority amounts, list the rding to the creditor's name. If you particular claim, list the other cred	nat claim here and show I have more than two p litors in Part 3.	both priority	and nonprior	rity amounts.
				,	Total claim	Priority amount	Nonpriority amount
2.1 IRS 1			Last 4 digits of account numbe	r	\$1,000.00	\$0.00	\$1,000.00
PO B	ty Creditor's Name lox 7346		When was the debt incurred?	n/a			
Num	ber Street		As of the date you file, the claim apply.	n is: Check all that			
City Who I	·	19101 Zip Code er	Contingent Unliquidated Disputed Type of PRIORITY unsecured cl Domestic support obligations Taxes and certain other debts government Claims for death or personal intoxicated	s you owe the			
is the	e claim subject to offset?		Other. Specify				

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Debto	r 1 Robyn First Name	N Middle Name	Tolliver Last Name	Case number (if known)	
Part 2	List All of Your NONPRIO				
3. D	o any creditors have nonpriority No. You have nothing to report Yes. ist all of your nonpriority unsecu	r unsecured claims aga ort in this part. Submit t ured claims in the alpha	ninst you? his form to the co	ourt with your other schedules. f the creditor who holds each claim. If a creditor has more	
lf	·	-		d, identify what type of claim it is. Do not list claims already i : 3.If you have more than four priority unsecured claims fill o	
					Total claim
4.1	AMERICAN STUDENT AST Nonpriority Creditor's Name 100 CAMBRIDGE ST STE 160 Number Street			st 4 digits of account number 8466 een was the debt incurred? 12/1/2013	\$4,371.00
		rd another		of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed D	
4.2	AMERICAN STUDENT AST Nonpriority Creditor's Name		Las	st 4 digits of account number 8435	\$4,049.00
	BOSTON Massa City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim relates Is the claim subject to offset? Yes	d another	As D	of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed De of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
4.3	CAPITAL ONE		Las	st 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name PO BOX 30253 Number Street SALT LAKE CITY Utah City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim relates Is the claim subject to offset?	rd another	As	of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed De of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Bill	
		, 223	<u> </u>	Outon Opening Orean Oard Dill	

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CHASE CARD \$1,685.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11/1/2007 PO BOX 15298 As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON Delaware 19850 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes ComEd \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Number Street As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated Oakbrook Terrace 60181 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Electric Bill Is the claim subject to offset? **✓** No Yes CONVERGENT OUTSOURCING 4.6 \$798.00 Last 4 digits of account number Nonpriority Creditor's Name 10/1/2016 Po Box 9004 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 98057 Renton Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

V

Other. Specify

001 Collection; Collecting for

ORIGINAL CREDITOR: T-MOBILE

USA

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 CRD PRT ASSO \$2,035.00 Last 4 digits of account number Nonpriority Creditor's Name 13355 NOEL ROAD# When was the debt incurred? 9/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **DALLAS** Texas 75240 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **V ORIGINAL CREDITOR: 10 ✓** No Other. Specify PEOPLES GAS LIGHT COKE CO Yes Direct TV \$200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2230 E. Imperial Hwy Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 90245 California El Segundo City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Cable Bill Is the claim subject to offset? **✓** No Yes DSNB MACYS 4.9 \$623.00 6482 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/1/2011 PO Box 8113 Number Street As of the date you file, the claim is: Check all that apply. Contingent 45040 Ohio Mason Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts Other. Specify _

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar

CreditCard

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 LC SYSTEM INC \$347.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/1/2014 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL Minnesota 55164 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: AT T **✓** No Other. Specify **UVERSE** Yes 4.11 PORTFOLIO RECOVERY ASS \$317.00 Last 4 digits of account number 6400 Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 10/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent NORFOLK Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Rush Hospital 4.12 \$3,000.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1700 W Van Buren # 161 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60612 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Medical Bill Is the claim subject to offset? **✓** No

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 U S DEPT OF ED/GSL/ATL \$6,141.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 11/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 U S DEPT OF ED/GSL/ATL \$5,967.00 Last 4 digits of account number 9577 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 7/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.15 \$5,579.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 12/1/2008 Number As of the date you file, the claim is: Check all that apply. Contingent 30301 ATLANTA Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Tolliver Debtor 1 Robyn Ν Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 U S DEPT OF ED/GSL/ATL \$4,790.00 Last 4 digits of account number 9717 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 12/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.17 U S DEPT OF ED/GSL/ATL \$3,319.00 Last 4 digits of account number 9578 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 7/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.18 \$2,185.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 11/1/2009 Number As of the date you file, the claim is: Check all that apply. Contingent 30301 ATLANTA Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor	1 Robyn First Name	N Middle Name	Tolliver Last Name	Case number (if known)				
Part 2:	.			age				
	After listing any entries on	this page, number them	beginning with	4.5, followed by 4.6, and so forth.	Total claim			
4.19	UIC Hospital Nonpriority Creditor's Name 1740 West Taylor Street Number Street			When was the debt incurred? As of the date you file, the claim is: Check all that apply.	\$2,000.00			
	City St	inois 60612 tate Zip Coo	de	Contingent Unliquidated Disputed				
	Who incurred the debt? Cho Debtor 1 only	eck one.		Type of NONPRIORITY unsecured claim: Student loans				
	Debtor 2 only							
	Debtor 1 and Debtor 2 or	nly		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtor	rs and another		Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim rela	ites to a community debt		Other. Specify Medical Bill				
	Is the claim subject to offse	et?						
	✓ No							
	Yes							

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Tolliver Case number (if known)
Last Name

Port 4: Add th	ne Amounts for Each Type of Unsecured Claim				
6. Total the a	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes only. 28 l	J.S.C. §159.	
			Total claims		
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00		
	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 		\$1,000.00		
			\$0.00		
			6d. \$0.00		
			\$1,000.00		
			Total claims		
Total claims from Part 2	6f. Student loans	6f.	\$36,401.00		
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00		
	6h. Debts to pension or profit-sharing plans, and other similar debts		\$0.00		
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$12,605.00		
	6j. Total. Add lines 6f through 6i.	6j.	\$49,006.00		

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Fill in this infor	rmation to identify your ca	ase:		
Debtor 1	Robyn	N	Tolliver	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number			(3,	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or com	pany with whom you have	e the contract or lease	State what the contract or lease is for
Darden, Cynthia Name	à		Residential Lease, Debtor is Lessee, Oral Monthly Residential Lease with Mother
Number	Street		
City	State	Zip Code	

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Fill in this infor	mation to identify your	case:		
Debtor 1	Robyn	N	Tolliver	
	First Name	Middle Name	Last Name	_
Debtor 2	-			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the	e: Northern	District of Illinois	
Case number			(State)	
(If known)				
				Check if this is an
				amended filing
Official	Form 106H			
		-		
Schedul	e H: Your Co	debtors		12/15
1. Do you ha No Yes 2. Within the Idaho, Lou No. Yes.	e last 8 years, have yo uisiana, Nevada, New M Go to line 3.	you are filing a joint case, do bu lived in a community pro lexico, Puerto Rico, Texas, W mer spouse, or legal equiva	perty state or territory? (<i>C</i> ashington, and Wisconsin.)	community property states and territories include Arizona, California,
		nit, atata ar tarritan, did va	u livo?	Fill in the course and account address of the transport
	1 65. III WHICH COMMU	ring state or territory and you	1 IIV C !	. Fill in the name and current address of that person.
	Name of your spouse	e, former spouse, or legal equ	ivalent	_
	Number Street			_
	City	State	Zip Code	-
again as a	a codebtor only if that	person is a guarantor or c	osigner. Make sure you ha	our spouse is filing with you. List the person shown in line 2 we listed the creditor on Schedule D (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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				. ago o .			
Fill in th	is information to identify	your case:					
Debtor 1	Robyn	N	Tolliver				
	First Name	Middle Name	Last Na	me	Ch	eck if this is:	
Debtor 2	f filing) First Name	Middle Name	Last Na	mo	- _	An amended filing	
						A supplement showing post-petition	n chapter 1:
United S the:	states Bankruptcy Court for	Northern	District of Illin (Sta		- "	expenses as of the following date:	Tonapior I
Case nui	mber		(0		_		
(If known)						MM / DD / YYYY	
Offici	ial Form 106I						
Sche	dule I: Your In	come					12/1
informat spouse. number	tion about your spouse. I	f you are separated an I, attach a separate she y question.	d your spouse	e is not filing	with you, do	ur spouse is living with you, incloon not include information about tional pages, write your name a	your
1. Fill i	n your employment		Debtor 1			Debtor 2	
infor	rmation.	Employment status	- Employ	ad		Employed	
	u have more than one job, th a separate page with		Employ Not Em			Not Employed	
infor	mation about additional		_			Thot Employed	
	loyers.	Occupation	Pharmacy B	luyer		_	
	ide part time, seasonal, or employed work.	Employer's name	Completerx,	LTD			
Occi	upation may include student	Employer's address	3100 S Gessner #640			_	
	omemaker, if it applies.		Number Stree	et		Number Street	
			Houston	Texas	77063		
			City	State	Zip Code	City State Zip	Code
		How long employed	12 years 4 r	months			
		there?					
Part 2:	Give Details About N	Monthly Income					
	te monthly income as of tunless you are separated.	the date you file this for	n. If you have n	othing to repo	ort for any line,	write \$0 in the space. Include your r	non-filing
If you o	, ,		, combine the in	formation for	all employers f	or that person on the lines below. If y	you need
more s _i	Jace, attach a separate she	et to tills form.		For I	Debtor 1	For Debtor 2 or non-filing spouse	
	st monthly gross wages, sala ductions.) If not paid monthly			2.	\$3,220.51		
3. Es	timate and list monthly ove	rtime pay.		3	+ \$0.00		
4. C a	llculate gross income. Add l	ine 2 + line 3.		4.	\$3,220.51		

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Debi	tor 1Robyn First Name	TROBYN N Tolliver First Name Middle Name Last Name			Case number (if known)			
	riiot italiio	Widdle Hallie	Laot Hamo		For Debtor 1	For Debtor 2 or non-filing spouse		
Co	py line 4 here		→ 4	↓.	\$3,220.51			
5. Lis	st all payroll dedu							
58	a. Tax, Medicare,	and Social Security deductions	5	ōa.	\$391.41			
5 k	o. Mandatory con	tributions for retirement plans	5	ōb.	\$0.00			
50	c. Voluntary contr	ibutions for retirement plans	5	ōc.	\$0.00			
50	d. Required repay	ments of retirement fund loans	5	ōd.	\$0.00			
56	e. Insurance		5	ēe.	\$374.83			
5f	. Domestic suppo	rt obligations	5	ōf.	\$0.00			
50	g. Union dues		5	ōg.	\$0.00			
5ł	n. Other deductio	ns. Specify:	_ 5	5h. +	\$0.00 +			
6. A d +5h.	ld the payroll ded	uctions. Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6	6.	\$766.24			
7. C a	lculate total mon	athly take-home pay. Subtract line 6 from line	4. 7	7.	\$2,454.27			
8. Lis	st all other incom	e regularly received:						
88	business, profes	-						
	gross receipts, or	nt for each property and business showing rdinary and necessary business expenses, and		2.0	\$0.00			
ΩI	the total monthly b. Interest and div			3a. 3b.	\$0.00			
		payments that you, a non-filing spouse, or		10.	φυ.υυ			
	Include alimony,	spousal support, child support, maintenance, nt, and property settlement.	8	3c.	\$0.00			
80	d. Unemployment			3d.	\$0.00			
	e. Social Security			Be.	\$557.00			
8f	Include cash assi cash assistance tl	ent assistance that you regularly receive stance and the value (if known) of any non- hat you receive, such as food stamps (benefits mental Nutrition Assistance Program) or s		Bf.	\$0.00			
89	g. Pension or retir	rement income	8	3g.	\$0.00			
81	n. Other monthly i	income. Specify:	8	3h. +	\$0.00 +			
9. A d	ld all other incom	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- 8h. 9	9.	\$557.00			
		income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp		10.	\$3,011.27 +	=	: \$3	3,011.27
In fri	clude contributions ends or relatives.	ular contributions to the expenses that you s from an unmarried partner, members of your amounts already included in lines 2-10 or amou	household	l, your o	dependents, your roomn			
Sp 	pecify:					1	1. +	\$0.00
		the last column of line 10 to the amount in the Summary of Schedules and Statistical Sur					2\$3	3,011.27
							Combined monthly in	
13. D	No.	ncrease or decrease within the year after y	you file thi	s form	?			
	Noo Familia I							
L	Yes. Explain:							

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		Docu	ment Page 36 of 69)		
Fill in this infor	mation to identify	your case:				
Debtor 1	Robyn First Name	N Middle Name	Tolliver Last Name			
Debtor 2	Tilstivalle	Wildle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng	
United States E	ankruptcy Court fo	or the: Northern [District of Illinois		nowing post-petition chapter 13 the following date:	
Case number			(State)	•	J	
(If known)			_	MM / DD / YYYY	,	
Official	Form 106	6J				
Schedul	e J: Your I	 Expenses			1:	2/15
(if known). Ans	more space is ne wer every questic cribe Your Hou		form. On the top of any additiona	l pages, write your n	ame and case number	
1. Is this a join	nt case?					
✓ No. Go	to line 2					
Yes. De	oes Debtor 2 live	in a separate household?				
	No					
	Yes. Debtor 2 n	nust file Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debt	or 2.		
2. Do you have	e dependents?	No				
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to	Dependent's	Does dependent live	
DODIOI Z.		caon appendent	Debtor 1 or Debtor 2 Child	age 12 years	with you? No.	
				<u> </u>	✓ Yes.	
	enses include f people other	✓ No				
than yourself and	d vour	Yes				
dependents	-					
Part 2: Estir	nate Your Ong	oing Monthly Expenses				
-	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup	•	•	-	
		non-cash government assistance in the contract of the contract			Your expenses	
	or home owners	hip expenses for your residence. In t. 4.	clude first mortgage payments and		\$600. 0	00
If not incl	uded in line 4:					
4a. Real es	state taxes				49 \$0.0	00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Robyn N Tolliver Case number (if known)
First Name Middle Name Last Name

First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage paymen	ts for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural gas		6a.	\$200.00
6b. Water, sewer, garbage colle	ection	6b.	\$0.00
6c. Telephone, cell phone, Inte	ernet, satellite, and cable services	6c.	\$150.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping supp	lies	7.	\$510.00
8. Childcare and children's edu	cation costs	8.	\$230.00
9. Clothing, laundry, and dry cle	eaning	9.	\$125.00
10. Personal care products and	services	10.	\$123.00
11. Medical and dental expense	es	11.	\$85.00
12. Transportation. Include gas, Do not include car payments	maintenance, bus or train fare.	12.	\$300.00
13. Entertainment, clubs, recre	ation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions an	d religious donations	14.	\$0.00
15. Insurance. Do not include insurance dedu	cted from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$0.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$100.00
15d. Other insurance. Specify:		15d	\$0.00
16. Taxes. Do not include taxes of	educted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease payme	nts:	10	
17a. Car payments for Vehicle		17a	\$385.00
17b. Car payments for Vehicle	2	17b	\$0.00
17c. Other. Specify: Monthly	Student Loan Payment	17c	\$50.00
17d. Other. Specify: Monthly	Payment for Storage Unit	17d	\$147.00
	maintenance, and support that you did not report as deducted from		\$0.00
	e I, Your Income (Official Form 106I).	18.	
	o support others who do not live with you.		
Specify:		19.	\$0.00
20. Other real property expense 20a. Mortgages on other prop	s not included in lines 4 or 5 of this form or on Schedule I: Your Income.	200	£0.00
20b. Real estate taxes.		20a 20b	\$0.00 \$0.00
20c. Property, homeowner's, of	or renter's insurance		
20d. Maintenance, repair, and		20c	\$0.00
20e. Homeowner's association		20d	\$0.00
206. HOMEOWINE S association	i oi oondominidiii duca	20e	\$0.00

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Debtor 1			N	Tolliver	Case number (if known)			
	First Na		Middle Name	Last Name				
21.Other	. Speci	fy:				21		\$0.00
	-	our monthly expenses.					_	\$3,005.00
		es 4 through 21.	(D.I. 0) ''				=	\$0.00
	. ,	` , ,	,,	, from Official Form 106J-2			_	\$3,005.00
		22a and 22b. The result		enses.		22.		
	-	our monthly net income						
23a. (Copy lir	ne 12 (your combined mo	onthly income) from	Schedule I.		23a	_	\$3,011.27
23b. (Сору у	our monthly expenses fro	m line 22 above.			23b		\$3,005.00
		t your monthly expenses		ncome.				\$6.27
-	The res	ult is your monthly net in	come.			23c	_	
For e	xample	e, do you expect to finish	paying for your car	leses within the year after loan within the year or do y modification to the terms of	ou expect your			

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Fill in this information to identify your case:									
Debtor 1	Robyn	N	Tolliver						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)						
Case number			(,						

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	help you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and
×	·	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 3/1/2017	Date
	MM/DD/YYYY	MM/DD/YYYY

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Debtor 1	Robyn First Name	N Middle Name	Tolliver Last Nam	e			
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Nam				
Jnited States E	Bankruptcy Court for the:		District of Illino				
Case number			(State	e)			
f known)							Check if this
Official	Form 107						amended filir
tateme	nt of Financia	I Affairs for	Individuals	Filing for	Bankru	ıptcy	1
	te and accurate as po f more space is neede						
	own). Answer every q		Sifeet to this form	. On the top of	arry addition	nai pages, write	e your marile and case
art 1: Give	Details About Your	Marital Status and	Where You Lived	Before			
. What is	your current marital sta	atus?					
☐ Ma	rried						
☐ Ma	rried married						
☐ Ma		ou lived anywhere othe	er than where you liv	ve now?			
☐ Mai ✓ Not 2. During t ✓ No	married he last 3 years, have yo	·	·				
☐ Mai ✓ Not 2. During t ✓ No	married	·	·		ow.		
☐ Mal ✓ Not 2. During t ✓ No ☐ Yes	married he last 3 years, have your control of the places you	ou lived in the last 3 ye	ars. Do not include v	where you live n	ow.		Datas Bakkan O liva d
☐ Mal ✓ Not 2. During t ✓ No ☐ Yes	married he last 3 years, have yo	ou lived in the last 3 ye	·		ow.		Dates Debtor 2 lived there
☐ Mal ✓ Not 2. During t ✓ No ☐ Yes	married he last 3 years, have your control of the places you	ou lived in the last 3 ye	ars. Do not include v	where you live n			
☐ Mal ✓ Not 2. During t ✓ No ☐ Yes	married he last 3 years, have your control of the places you	ou lived in the last 3 ye	ars. Do not include v tes Debtor 1 lived ere	where you live n			there Same as Debtor 1
Mai ✓ Not During t ✓ No ☐ Yes Det	married he last 3 years, have your control of the places you	ou lived in the last 3 ye Da the	ars. Do not include v tes Debtor 1 lived ere	where you live n	Debtor 1		there Same as Debtor 1 From
Mai ✓ Not During t ✓ No ☐ Yes Det	married he last 3 years, have your control of the places you could be places you could be places.	ou lived in the last 3 ye	ars. Do not include v tes Debtor 1 lived ere	vhere you live n Debtor 2: Same as	Debtor 1		there Same as Debtor 1
Mai ✓ Not During t ✓ No ☐ Yes Det	married he last 3 years, have your content of the places your content of the places you content	ou lived in the last 3 ye Da the	ars. Do not include v tes Debtor 1 lived ere	vhere you live n Debtor 2: Same as	Debtor 1	Zip Code	there Same as Debtor 1 From
☐ Mal ✓ Not During t ✓ No ☐ Yes Det	married he last 3 years, have your content of the places your content of the places you content	Da lived in the last 3 ye	ars. Do not include v tes Debtor 1 lived ere	Debtor 2: Same as Number Stree	Debtor 1	Zip Code	there Same as Debtor 1 From
☐ Mal ✓ Not ✓ Not ✓ No ✓ Pes ✓ No ☐ Yes ✓ Det	married he last 3 years, have your content of the places you could be placed by the places you could be placed by the placed by	Da the last 3 ye To Zip Code	ars. Do not include v	Debtor 2: Same as Number Stree City Same as	Debtor 1 State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
☐ Mal ✓ Not P. During t ✓ No ☐ Yes Det	married he last 3 years, have your content of the places your content of the places you content	Da lived in the last 3 ye	ars. Do not include v	Debtor 2: Same as Number Stree	Debtor 1 State Debtor 1	Zip Code	there Same as Debtor 1 From To
☐ Mai ✓ Not ✓ Not ✓ No ✓ During t ✓ No ☐ Yes ✓ Det	married he last 3 years, have your content of the places you could be placed by the places you could be placed by the placed by	Da the Zip Code From To	ars. Do not include v	Debtor 2: Same as Number Stree City Same as	Debtor 1 State Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From From

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Case number (if known)

Tolliver

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$6203.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$37470.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$39073.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. Social Security From January 1 of current year until Income \$1,114.00 the date you filed for bankruptcy: Est. Social Security For last calendar year: Income \$6,360.00 (January 1 to December 31, 2016 Est. Social Security For the calendar year before that: Income \$6,360.00 (January 1 to December 31, 2015

Debtor 1 Robyn

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Tolliver Debtor 1 Robyn Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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or 1	1 Robyn		N		lliver	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp ge	iders include your porations of whic	r relatives; a h you are a for a busir	any general partner an officer, director, ness you operate a	s; relatives of any person in control,	general partners; par , or owner of 20% or	tnerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
✓	No						
	Yes. List all pay	yments to a	an insider.	Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	neason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No		aranteed or cosigne at benefited an ins	•	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name				<u> </u>		
	Number Street						
	City	State	Zip Code				

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Debtor 1 Robyn Tolliver Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debtor	1 Robyn	N	Tolliver	Case number (if known)		
	First Name	Middle Name	Last Name			
	ithin 90 days before you cocounts or refuse to make			ank or financial institution, se	et off any amou	ints from your
·	No					
	Yes. Fill in the details.					
			Describe the action the	creditor took	Date action was taken	Amount
	Creditor's Name		-			
	Number Street		-			
	-		_ Last 4 digits of account n	umber: XXXX-		
			_			
	City State	e Zip Code	_			
	ithin 1 year before you filo opointed receiver, a custo			possession of an assignee for	the benefit of o	creditors, a court-
J	No					
È	Yes					
	.					
Part 5:	List Certain Gifts and	d Contributions				
13. V	Vithin 2 years before you	filed for bankruptcy, di	d you give any gifts with a to	tal value of more than \$600 إ	per person?	
г	✓ No					
Ľ	Yes. Fill in the details f	for each gift				
L	Gifts with a total value	-	Describe the gifts		Dates you	Value
	per person				gave the gifts	
	Person to Whom You G	ave the Gift	_			
			_			
	Number Street		_			
	Number Street					
	City State	e Zip Code	_			
	Person's relationship to	you				
	Person to Whom You G	ave the Gift	_			
			_			
			_			
	Number Street					
	City State	e Zip Code	-			
	Person's relationship to	you				

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Debte		Robyn	N	Tolliver	Case number (if known,		
		First Name	Middle Name	Last Name			
	\A/:±	hin 0 and hafana filed fo				: th #COO	
14.	WIT	hin 2 years before you filed for	r bankruptcy, did y	you give any giπs or contrib	utions with a total value of	more than \$600	to any charity?
	✓	No					
	П	Yes. Fill in the details for each	h gift or contributio	n.			
	_	Gifts or contributions to cha	rities	Describe what you cont	ributed	Date you	Value
		that total more than \$600	iiiies	Describe what you come	iibuteu	contributed	Value
		•					
		-				-	
		Charity's Name					
			-				
		Number Street					
		Cit. Chata	7:- O				
		City State	Zip Code				
Dort	6.	List Certain Losses					
Part	o:	List Certain Losses					
		hin 1 year before you filed for nbling?	bankruptcy or sind	ce you filed for bankruptcy,	did you lose anything beca	iuse of theft, fire,	other disaster, or
	gan	ibing:					
	V	No					
	Ħ	Yes. Fill in the details.					
	ш						
		Describe the property you lo how the loss occurred	st and	Describe any insurance Include the amount that i		Date of your loss	Value of property lost
		now the loss occurred		pending insurance claims		1055	1051
				A/B: Property.	oo oo o. ooouu.o		
Part	7.	List Certain Payments or	Transfore				
	Witl	hin 1 year before you filed for	bankruptcy, did yo		your behalf pay or transfer	any property to a	anyone you consulted
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did yo paring a bankrupto	cy petition?			anyone you consulted
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prej ude any attomeys, bankruptcy p	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies fo	r services required in your bar	nkruptcy.	
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did yo paring a bankrupto	cy petition?	r services required in your bar	Date payment or transfer	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prej ude any attomeys, bankruptcy p No Yes. Fill in the details.	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prej ude any attomeys, bankruptcy p No Yes. Fill in the details.	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies fo Description and value o	r services required in your bar	Date payment or transfer	Amount of
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for ut seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	bankruptcy, did yo paring a bankrupto	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prejude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	bankruptcy, did yo paring a bankrupto etition preparers, or	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prejude any attorneys, bankruptcy put No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State	bankruptcy, did yo paring a bankrupto etition preparers, or	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prejude any attorneys, bankruptcy pounde and attorneys, bankruptcy pounde any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payment	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prejude any attorneys, bankruptcy pounde and attorneys, bankruptcy pounde any attorneys, bankruptcy pounde	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payment	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prepute any attorneys, bankruptcy por No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Paymen Person Who Was Paid Number Street	bankruptcy, did yoparing a bankrupto paring a bankrupto petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for out seeking bankruptcy or prepude any attorneys, bankruptcy pounde any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payment	bankruptcy, did yo paring a bankrupto etition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prejude any attorneys, bankruptcy pounde any attorneys, bankruptcy pounde any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded and any attorneys pounded and any attorneys pounded and any attorneys pounded any attorneys pounded and any attorneys pounded any attorneys, bankruptcy pounded any attorneys pounded any attorneys attorneys pounded any attorneys pounded any attorneys attorneys pounded any attorneys	bankruptcy, did yoparing a bankrupto paring a bankrupto petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment
	Witl abo	hin 1 year before you filed for put seeking bankruptcy or prepute any attorneys, bankruptcy por No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Paymen Person Who Was Paid Number Street	bankruptcy, did yoparing a bankrupto paring a bankrupto petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of transferred	r services required in your bar	Date payment or transfer was made	Amount of payment

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Debtor	1 Robyn N		Tolliver	Case number	(if known)	
	First Name Mid	Idle Name	Last Name			
he	ithin 1 year before you filed for ban elp you deal with your creditors or to not include any payment or transfer	o make payme	nts to your creditors?	your behalf pay or t	ransfer any property to a	inyone who promised to
▽	No Yes. Fill in the details.					
	-		Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					
	Cit. Chat-	Zin Onda				
	City State	Zip Code				
In	e ordinary course of your business clude both outright transfers and trans and transfers that you have already listed. No Yes. Fill in the details.	sfers made as se	ecurity (such as the granting o	f a security interest or	mortgage on your proper	y). Do not include gifts
	Tes. I ili il tile details.		Description and value of	om.	ilha amu muamantu au	Data
			Description and value of property transferred	paym	ribe any property or ents received or debts p change	Date transfer was made
	Person Who Received Transfer					
	Number Street					
	City State Person's relationship to you	Zip Code				
	Person Who Received Transfer					
	Number Street					
	City State Person's relationship to you	Zip Code				
be	ithin 10 years before you filed for be eneficiary? hese are often called asset-protection of		you transfer any property to	a self-settled trust	or similar device of whi	ch you are a
<u> </u>	No					
L	Yes. Fill in the details.		Description and value of	of the property trans	ferred	Date transfer was
						made
	Name of trust					

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Tolliver Debtor 1 Robyn Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Cube Smart Clothing and Furniture No Name of Storage Facility Name 1636 Lee Road Number Street Number Street City State Zip Code Lithia Springs 30122 Georgia Zip Code City

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Page 49 of 69 Document Tolliver Debtor 1 Robyn Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet

City

State

Zip Code

State

Zip Code

City

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Debte		Robyn		N	Tolliver	Case r	number <i>(if i</i>	known)		
		First Name		Middle Name	Last Name					
26.	Hav	No		cial or administ	trative proceeding unde	r any environmenta	l law? Ind	clude settlem	ents and orde	rs.
		Yes. Fill in the det	tails.							
					Court or agency		Nature o	f the case		Status of the case
		Case title								Pending
				_	Court Name					On appeal
		Case number			NumberStreet					Concluded
		_			City State	Zip Code				
Part	11:	Give Details Al	bout Your E	Business or C	onnections to Any Bu	usiness				
27.	Witl	nin 4 years before	you filed for	bankruptcy, di	d you own a business or	r have any of the fol	lowing co	onnections to	any business?	?
		A sole propri	ietor or self-e	employed in a tr	rade, profession, or othe	er activity, either full-	-time or p	art-time		
		A member of	f a limited lial	oility company ((LLC) or limited liability p	artnership (LLP)				
		A partner in a	a partnership)						
		An officer, di	rector, or ma	anaging executi	ive of a corporation					
		_			equity securities of a cor	rporation				
		_		_						
	✓	No. None of the a								
		Yes. Check all that	at apply abo	ve and fill in the	e details below for each	business.				
					Describe the nat	ure of the business	i	Employer Ide	entification nu	umber Do not
								include Soc	ial Security nu	ımber or ITIN.
		Business Name						EIN:		
		Number Street			Name of account	tant or bookkeeper	,	Dates busin	ess existed	
		City	State	Zip Code	_			From	To	
					Describe the nat	ure of the business	;		entification nu ial Security nu	
		Business Name			_			EIN:		
		Number Street						Dates busin	ess existed	
					Name of account	tant or bookkeeper	•			
		City	State	Zip Code				From	To	
					Describe the nat	ure of the business		Employer Ide	entification nu	umber Do not
									ial Security nu	
		Business Name			_			EIN:		
		Number Street						Dates busin	ess existed	
		City	Ctoto	Zin Co-l-	Name of account	tant or bookkeeper		_	_	
		City	State	Zip Code				From	To	

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Debt	tor 1 Robyn	N	Tolliver	Case number (if known)
	First Name	Middle Name	Last Name	
28.	creditors, or other		you give a financial stateme	nt to anyone about your business? Include all financial institutions,
	✓ No Yes. Fill in the o	details below.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Stree	et	<u> </u>	
	City	State Zip Code		
Part	12: Sign Below			
t	rue and correct. I ui a bankruptcy case c	nderstand that making a false s an result in fines up to \$250,000	tatement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Robyn Tolliver nature of Debtor 1		Signature of Debtor 2
	ŭ	e 3/1/2017		Date
[[No Yes	ional pages to Your Statement to pay someone who is not an		luals Filing for Bankruptcy (Official Form 107)?
	Yes. Name of per	son		Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:									
Debtor 1	Robyn	N	Tolliver						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		Northern	District of Illinois (State)						
Case number (If known)									

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Santander Consumer USA Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2008 Volkswagen Jetta Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Robyn	N	Tolliver	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired Person	onal Property Leas	ses	
informa		ate leases. Unexpire	d leases are leases that	or Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
De	scribe your unexpired personal	l property leases		Will the lease be assumed?
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			_
Part 3:	Sign Below			
	er penalty of perjury, I declare perty that is subject to an unex		my intention about any	property of my estate that secures a debt and any personal
_	/s/ Robyn Tolliver		_ x	
S	Signature of Debtor 1		Sig	nature of Debtor 2
D	Date 3/1/2017 MM/DD/YYYY		Da	te MM/DD/YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distric	t or illinois	
In re _	Robyn N Tolliver		Case No.	
=	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSATIO	N OF ATTORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one yearendered or to be rendered on behalf of	ear before the filing of the p	petition in bankruptcy, or agreed to	o be paid to me, for services
	For legal services, I have agreed to acce	ept		\$1,465.00
	Prior to the filing of this statement I have	ve received		\$0.00
	Balance Due			\$1,465.00
2.	. The source of the compensation paid to	o me was:		
	✓ Debtor	Other (specify)		
3.	. The source of the compensation paid to	o me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law		with any other person unless the	y are
	I have agreed to share the above-d members or associates of my law f the people sharing in the compens	firm. A copy of the agreeme		
5.	In return for the above-disclosed fee, I l a. Analysis of the debtor's financia bankruptcy;			
	b. Preparation and filing of any pe	etition, schedules, statemen	nts of affairs and plan which may b	pe required;
	c. Representation of the debtor at	the meeting of creditors ar	nd confirmation hearing, and any a	adjourned hearings thereof;
6.	. By agreement with the debtor(s), the ab	ove-disclosed fee does no	t include the following services:	
		CERTIFICA	ATION	
	certify that the foregoing is a complete stor(s) in this bankruptcy proceedings.	statement of any agreemen	t or arrangement for payment to n	ne for representation of the
	3/1/2017		/s/ Morsheda Hashem	
	Date		Signature of Attorney	
			Semrad Law Firm	
	-		Name of law firm	 -

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	<u> </u>	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Tolliver, Robyn N	Case No	
	Debtor(s)	Case NO.	
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	RIX
Th knowledge		fy that the attached list of creditors is tr	ue and correct to the best of their
Date:	3/1/2017	/s/ Tolliver, Roby Tolliver, Robyn N	
		Signature of Deb	

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

AMERICAN STUDENT AST 100 CAMBRIDGE ST STE 160 BOSTON, MA, 02114

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

CRD PRT ASSO 13355 NOEL ROAD# DALLAS, TX, 75240

CHASE CARD PO BOX 15298 WILMINGTON, DE, 19850

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON, WA, 98057

DSNB MACYS PO Box 8113 Mason, OH, 45040

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA, 23502

IRS 1 PO Box 7346 Philadelphia, PA, 19101

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

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CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

Rush Hospital 1700 W Van Buren # 161 Chicago, IL, 60612

UIC Hospital 1740 West Taylor Street Chicago, IL, 60612

Direct TV PO Box 5007 Carol Stream, IL, 60197

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: PTT

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Client Pholippe Client ______

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Debtor 1 Robyn First Name	N Middle Name	Tolliver Last Name	Case number (if known)	
	uestions for Reporting Purpor			
16. What kind of debts do you have?	16a. Are your debts primar "incurred by an individ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primar	rily consumer debts ual primarily for a pe rily business debts? or investment or thro	ersonal, family, or househo Business debts are debts bugh the operation of the b	that you incurred to obtain ousiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	✓ No.	ter 7. Do vou estimate		erty is excluded and administrative creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5 5,001-1 10,001-	0,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$10,000 \$50,000	001-\$10 million 0,001-\$50 million 0,001-\$100 million 10,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ***Signature of Debtor 1** Signature of Debtor 2** Signature of Debtor 2** Signature of Debtor 2**			
TO SAN THE CANADA PARAMETERS AND A STATE OF THE SAN TH	MM / DE	D/YYYY	Executed on _	MM / DD / YYYY

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Debtor 1	Robyn	N	Tolliver
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number (f known)			(State)

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below				
	Did you pay or agree to pay someone who is NOT an attorney to I	nelp you fill out bankruptcy forms?			
	☑ No				
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.				
×	/s/ Robyn Tolliver	×			
	Signature of Debtor 1	Signature of Debtor 2			
	Date 3/1/2017 MM/DD/YYYY	Date MM/DD/YYYY			

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Debtor 1 Robyn	N	Tolliver	Case number (if known)
First Name	Middle Name	Last Name	
28. Within 2 years before yo creditors, or other parti No Yes. Fill in the detail	es .	you give a financial staten	nent to anyone about your business? Include all financial institutions
		Date issued	
Name		MM/DD/YYYY	_
Number Street	•	<u> </u>	
City	State Zip Code		
Part 12: Sign Below			
/s/Rol	byn Tolliver	or imprisonment for up to	erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
Signature	of Debtor 1		Signature of Debtor 2
Date 3/1	/2017		Date
Did you attach additional i	pages to Your Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
☑ No			dadio Filmig for Bankruptey (Onicial Form 107)?
Yes			
Did you pay or agree to pay	y someone who is not an at	torney to help you fill out	bankruptcy forms?
✓ No			
Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor R		N	Tolliver	Case number (if	
1 Fi	irst Name	Middle Name	Last Name	known)	
Part 2: Li	st Your Unexpired Perso	onal Property Leases			
For any un	expired personal property l	ease that you listed in So	hedule G: Executory	y Contracts and Unexpired Leases (Official Form 106G), fill in the	
	n below. Do not list real est unexpired personal proper	ate leases, offexbired le	ases are leases that a	' are still in effect: the lease neried has not set and at M	
Descri	be your unexpired personal	property leases		Will the lease be assumed?	
Lessor	s name:	en monte en manuel en en en en manuel en manue	enths william on the management of the second of the secon	No Yes	
Descrip propert	tion of leased y:			Local	
Lessor	s name:			☐ No ☐ Yes	for annual scale of
Descript property	tion of leased y:		manamanan da sarang ang ang ang ang ang ang ang ang ang	CONTRACT AND THE	
Lessor's	s name:		er for a filled trace of the control of the control of the filled trace of the control of the co	□ No □ Yes	
Descript property	tion of leased				made at the state of the state
Lessor's	s name:		an and an annual control of the second of th	□ No □ Yes	A STATE OF THE PARTY OF THE PAR
Descripti property	ion of leased :		and the second	and the state of t	PARTERNAL PROPERTY
Lessor's	name:		ndana manakan sa ang manakan sa manakan manakan sa kanakan sa kanakan sa kanakan sa kanakan sa kanakan sa kana Andana manakan manakan sa kanakan	□ No □ Yes	THE STREET
Descripti property:	on of leased :				1. W. A. B. B. W. F. B. F. T. T. VAND
	×4.		. 994	No.	,
Lessor's				No Yes	The state of the s
Description property:	on of leased				
Lessor's	name:			No	· community control
Description property:	on of leased		A A STORM IN SEC.	Yes Yes	*
art 3: Sigr	. Below				V-III-E-V
Under pen property t	alty of perjury, I declare the hat is subject to an unexpir	at I have indicated my in ed lease.	tention about any pro	roperty of my estate that secures a debt and any personal	
-	bbyn Tolliver H 1	liter	×		
			Signat	ature of Debtor 2	
Date 3.	/1/2017 //M/DD/YYYY		Date	MM/DD/YYYY	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Tolliver, Robyn N Debtor(s)	Case No	Case No				
		Chapter.	Chapter7				
	VEF	SIFICATION OF CREDITOR MATR	IX				
Tł knowledge	ne above named Debtors hereby e.	verify that the attached list of creditors is true	and correct to the best of their				
Date:	3/1/2017	/s/ Tolliver, Robyn N Tolliver, Robyn N Signature of Debtor	notalin				

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Debtor 1 Robyn First Name	N Middle North	Tolliver	Case numb	oer (if known)		
riistivane	Middle Name	Last Name	Column A Debtor 1		Column B Debtor 2 or non-filing spous	e
8. Unemployment compensate Do not enter the amount if y under the Social Security Act	ou contend that the amou	int received was a benefi	\$ <u>0.00</u>	-		
For your spouse		\$557.00 \$0.00				
9.Pension or retirement inco benefit under the Social Secu	ome. Do not include any a	mount received that was	s a \$ <u>0.00</u>	-		
10.Income from all other sou amount. Do not include any payments received as a victin international or domestic terr page and put the total below	rces not listed above.Sp benefits received under the n of a war crime, a crime a prism. If necessary, list oth	e Social Security Act or gainst humanity, or	e			•
Total amounts from separate	pages, if any.		+\$0.00		+	_ _
11. Calculate your total curre	ent monthly income. Add	l lines 2 through 10 for	\$3,668.93	. +		\$3,668.93
column. Then add the tota	I for Column A to the total	for Column B.				
Part 2: Determine Whether	ar the Means Test An	olios to Vou				Total current monthly income
12. Calculate your current mo						
12a. Copy your total current i				Copy line	11 here →	\$3,668.93
	ber of months in a year).					X 12
12b. The result is your annua	I income for this part of th	e form.			12	b. <u>\$44,027.16</u>
13 Calculate the median famil	y income that applies to	you. Follow these steps	s:			
Fill in the state in which you li	3 · M	Illinois Output Outp	energianis			
Fill in the number of people in	your household.	2				
Fill in the median family incom household.	ne for your state and size o	of			1	3. \$65,659.00
To find a list of applicable med instructions for this form. This 14. How do the lines compare?	s list may also be available	online using the link spe at the bankruptcy clerk's	ecified in the separate s office.			
14a. Line 12b is less than Go to Part 3.	or equal to line 13. On th	e top of page 1, check l	box 1, There is no presumpt	tion of abus	se.	
14b. Line 12b is more that Go to Part 3 and fill	an line 13. On the top of p out Form 122A-2.	age 1, check box 2, The	e presumption of abuse is do	etermined b	y Form 122A-2.	
Part 3: Sign Below		•				
By signing here, I declare und	der penalty of perjury that t	the information on this s	tatement and in any attachn	nents is true	and correct.	
Signature of Debtor 1	3 Jaller		Signature of Debtor 2			
Date 3/1/2017 MM/DD/YYYY			Date 3/1/2017 MM/DD/YYYY			
If you checked line 14a, do If you checked line 14b, fill	NOT fill out or file Form 1 out Form 122A-2 and file	22A-2. it with this form.				